FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000026590 (8)

1. Corporation Name

SOUTHWEST FLORIDA EMPLOYERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2706 HORSESHOE DR S SUITE 114 NAPLES FL 33942	2706 HORSESHOE DR S SUITE 114 NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/01/1993
3a. Date of Last Report: 04/15/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # etc. — 22 / 27
City & State — 23 / 28
24 / 25 / 29 / 30

4. FEI Number: 65-0403846 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has authority to administer tax under s. 196.192, Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SNEDIKER, BEVERLY J
101 COLONADE CIR
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1008, Florida Statutes, the above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR		13. ADDITIONAL OFFICER AND DIRECTOR	
Title	D	Title	☐ Change ☐ Add/Del
Name	DOHERTY, PHILLIP B	Name	
Address	2706 HORSESHOE DR S	Address	
City-St-Zip	NAPLES FL 33942	City-St-Zip	
Title	D	Title	☐ Change ☐ Add/Del
Name	SNEDIKER, THOMAS M	Name	
Address	2706 HORSESHOE DR S	Address	
City-St-Zip	NAPLES FL 33942	City-St-Zip	
Title	D	Title	☐ Change ☐ Add/Del
Name	SNEDIKER, BEVERLY J	Name	
Address	2706 HORSESHOE DR S	Address	
City-St-Zip	NAPLES FL 33942	City-St-Zip	
Title	D	Title	☐ Change ☐ Add/Del
Name	DOHERTY, PATRICIA A	Name	
Address	2706 HORSESHOE DR S	Address	
City-St-Zip	NAPLES FL 33942	City-St-Zip	
Title		Title	☐ Change ☐ Add/Del
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Add/Del
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	

14. I hereby certify that the information supplied with this report is accurate and that each authority for the corporation to file this report, as required by Chapter 607, Florida Statutes, is stated above. I further certify that the corporation has paid all fees due to the Department of State that are identified for filing with this report, and that its registered agent has agreed to serve as registered agent for the corporation and is familiar with and accepts the obligations of that position as set forth in Chapter 607, Florida Statutes.

SIGNATURE: Thomas Snediker Thomas Snediker 4-27-95 941 649-1900
SIGNATURE AND TYPED OR PRINTED NAME OF MOVING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number

0320117 CP